## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000025605

Entity Name: 739 WASHINGTON, L.L.C.

**FILED** Apr 25, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2600 DOUGLAS RD., STE 908 CORAL GABLES, FL 33134

**Current Mailing Address: New Mailing Address:** 

2600 DOUGLAS RD., STE 908 C/O 7000 W. PALMETTO PARK ROAD CORAL GABLES, FL 33134 SUITE 310

BOCA RATON, FL 33433 US

FEI Number: 56-2436121 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORRIS, STUART MORRIS, STUART R ESQ. 7000 W, PALMETTO PARK ROAD 7000 W, PALMETTO PARK ROAD BOCA RATON, FL 33433 US BOCA RATON, FL 33433 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STUART R. MORRIS, ESQ.

04/25/2006 Date

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete

POLSKY, ED Name: Name: Address: 2600 DOUGLAS RD SUITE 908 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

Name: POLSKY, JOAN Name: Address: 2600 DOUGLAS RD SUITE 908 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: STUART R. MORRIS, ESQ. 04/25/2006